PLEASE PRINT

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

OCT 23 2018

ATE

I. Name of Lobbyist(s)	Michael	Milan	him		NEW HAMPSHIRE DEPARTMENT OF ST
II. Name of lobbyist's pa		_			
•	-				
CAPITUL THS	partnership, firm or corp	oration)			
16 how Av	E CO.	NCONS	NH		* 03301
Business Address: (Street)		(Town/City)	(State)	(Zip Code)
603 226 560 (Telephone)	<u> </u>	CAPITUL	INSISPETAL	Group a	(Zip Code) . SMAIL · COM
(Telephone)		(Fax)	_	V	
III. This statement cover reportable expense trans					le a separate report for
All reportable transacti					
Property	CASUALTY /	vsurens	ASSOC.	of Awer	ICA (PCIAA
(Fu	Ill Name of Client as it ap	opears on the Lob	byist Registration	Form)	
OR ☐ All reportable transaction unrelated to any particular	•	cluding the lobb	yist's family), or	the lobbying fire	n listed below which are
-	pril 25, 2018 🗆	42/21/10	July 25, 2		
-	om date of registration of ctober 31, 2018	5 3/3 1/16	activity from 4/1.	30, 2019 \square	
	oity from 7/1/18 to 9/30/1	8	•	/1/18 to 12/31/18	
V. There have been no If this box is checked, com, Concord, NH 03301.	fees received and notete just this form and	o reportable t I submit it to the	ransactions m Secretary of Sta	ade since the late 's Office, State	ast report. House, Room 204,
VI. Check if additional re	eports are attached:				
☐ If you have received for	ees or made expenditur	es, you must fil	e Addendum A-	- Fees and Expen	ises
☐ If you have paid an ho Expense Reimbursement	norarium or reimburse	d expenses, you	must file Adder	ndum B– Report	of Honorariums or
•	our family has made po	olitical contribut	tions, you must f	ile Addendum C	C- Political Contributions
Sworn Statement/Affirm					
I have read RSA 15, RSA and complete to the best of			eby swear or aff	irm that the foreg	oing information is true
Muchael medo	uethin		1	0/3,/18	
(Signature of lobbyist)	0,			(Date)	
MICHAEL MC (Print Name of lobbyist)	Hughlin				

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STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) MIChAel Mc Laughlin	
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of parties ship, firm or corporation)	
(Name of partifeship, firm or corporation) III. Name of Client	Date 10/31/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	t relations, or public relations service oss fee amount reported shall not be
a) Total of all fees received in this reporting period	a) \$ 9,999.99 b) \$ 19,999.98
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ /9,449. 48 ear)
c) Total of all fees received to date	c)\$ <u>29,999.97</u>
(Add lines a and b)	c) \$
 Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$ a /
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of le being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business ss than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 fo ue of greater than \$25, purchase of er than \$25, but not greater than \$50, expense reimbursement, or politica
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$/
in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
NA	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
Muchael Aufauth (Signature of lobbyist)	10/3,/18 (Date)
MICHAEL MCLAughl:N (Print Name of lobbyist)	